- WAC 110-147-1300 What is the purpose of this chapter? (1) This chapter contains licensing requirements for all child placing agencies and the people who operate these programs. This chapter also includes regulations for adoption services provided by child placing agencies. These licensing regulations are designed to ensure children who are in care are safe, healthy, and protected from all forms of child abuse and neglect according to RCW 26.44.020(1) and chapter ((388-15)) 110-30 WAC.
- (2) If you are a child placing agency  $\underline{\text{(CPA)}}$  that certifies foster homes, the homes you certify must meet the full licensing requirements outlined in chapter (( $\frac{388-148}{10-148}$ ))  $\underline{110-148}$  WAC,  $\underline{\text{c}}$ hild foster home licensing requirements.

<u>AMENDATORY SECTION</u> (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1305 What definitions do I need to know to understand this chapter? The following words and terms are for the purpose of this chapter and are important to understanding these requirements:

"Abuse or neglect" means the injury, sexual abuse, sexual exploitation, negligent treatment or maltreatment of a child as defined in RCW 26.44.020.

"Adult" means a person (( $\frac{\text{eighteen}}{\text{oighteen}}$ ))  $\underline{18}$  years old or older, not in the care of the department.

"Agency" is defined in RCW 74.15.020(1).

"Asexual" means the lack of a sexual attraction or desire for other individuals.

"Assessment" means the appraisal or evaluation of a child's physical, mental, social ((and/or)) or emotional condition.

"Bisexual" means individuals who have an emotional or physical attraction to individuals of the same and different genders.

"Business hours" means hours during the day in which business is commonly conducted. Typically, the hours between 9 a.m. and 5 p.m. on weekdays are considered to be standard business hours.

(("CA" means children's administration.))

"Capacity" means the age range and maximum number of children on your current license.

"Care provider" means any person who is licensed or authorized to provide care for children and cleared to have unsupervised access to children under the authority of a license.

"Case manager" means the private agency employee who coordinates the planning efforts of all the persons working on behalf of a child.

"Case plan" means a written document adhered to and followed by a foster child's parents or guardians, foster parent or parents, the department, and all other caregivers. A case plan may include, but is not limited to:

(a) A description of the type of home or facility in which a child is to be placed, including a discussion of the safety and appropriateness of the placement and how the department plans to carry out

the voluntary placement agreement entered into or judicial determination made with respect to the child;

- (b) A plan for assuring that the child receives safe and proper care and that services are provided to the parents or quardians, child, and foster parents in order to improve the conditions in the parents' or quardians' home, facilitate return of the child to their own safe home or the permanent placement of the child, and address the needs of the child while in foster care, including a discussion of the appropriateness of the services that have been provided under the plan;
- (c) The health and education records of the child, including the most recent information available regarding:
- (i) The names and addresses of the child's health and educational providers;
  - (ii) The child's grade level performance;
  - (iii) The child's school record;
  - (iv) A record of the child's immunizations;
  - (v) The child's known medical conditions;
  - (vi) The child's medications; and
- (vii) Any other relevant health and education information concerning the child determined to be appropriate by the department.
  - (d) Relevant professional assessments of the child;
  - (e) Court orders concerning the child; and
- (f) Any other relevant plan, assessment, knowledge, material, or information concerning the child determined to be appropriate by the department.
- "Caseworker" means the primary agency worker assigned to the child through DCYF or other government agency.
- "Certification" means a licensed child placing agency (CPA) review that a foster home being supervised by that CPA meets licensing regulations. The final decision for licensing is the responsibility of
- ((<del>CA</del>)) the department of children, youth, and families.
  "Chapter" means chapter ((<del>388-147</del>)) <u>110-147</u> WAC.
  "Child," "children," or "youth" for this chapter, means a person who is one of the following:
- $((\frac{1}{1}))$  <u>(a)</u> Under  $(\frac{eighteen}{1})$  <u>18</u> years of age;  $(\frac{2}{1})$  Up to  $(\frac{eighteen}{1})$  <u>21</u> years of age and enrolled in services through the department of social and health services, developmental disabilities administration (DDA) the day prior to his or her ((eighteenth)) 18th birthday and pursuing either a high school or equivalency course of study (GED/HSEC), or vocational program;
- (((3))) (c) Up to ((twenty-one)) 21 years of age and participates in the extended foster care program;
- $((\frac{4}{)}))$  <u>(d)</u> Up to  $(\frac{twenty-one}{})$  <u>21</u> years of age with intellectual and developmental disabilities;
- $((\frac{5}{)}))$  (e) Up to  $(\frac{twenty-one}{25})$  years of age and under the custody of the ((Washington state)) juvenile ((justice)) rehabilitation ((administration)) system.
- "Child placing agency((" or ")) (CPA)" means an agency licensed to place children for foster care or adoption.
- "Compliance agreement" means a written improvement plan to address the changes needed to meet licensing requirements.
- (("DCFS" means the division of children and family services within children's administration. DCFS provides case management to children and families involved in the child welfare system.))
- "DDA" means the <u>department of social and health services</u>, developmental disabilities administration.

"Department ((or DSHS))" means the department of ((social and health services)) children, youth, and families (DCYF).

"Developmental disability" is a disability as defined in RCW 71A.10.020.

(("DLR" means the division of licensed resources within children's administration. DLR licenses and monitors foster homes, child placing agencies, and licensed group care facilities.))

"FBI" means the Federal Bureau of Investigation.

"Foster home or foster family home" means a person(s) licensed to regularly provide ((twenty-four-hour)) 24-hour care in their home to children.

"Gay" means a sexual orientation to describe individuals who are emotionally or physically attracted to someone of the same gender. Gay is sometimes an umbrella term for the LGBTQIA+ community.

"Gender" or "gender identity" means an individual's inner sense of being a female, male, a blend of both or neither, or another gender. This may or may not correspond with an individual's sex assigned at birth.

"Gender expression" means individuals' outward communication of their gender through behavior or appearance. This may or may not conform to their sex assigned at birth or socially defined behaviors and characteristics typically associated with being either masculine or feminine.

"Gender fluid" means individuals whose gender identities are flexible.

"Guardian" has the same meaning in this chapter as defined in RCW 26.33.020(11).

"Guns or weapons" means any device intended to shoot projectiles under pressure or that can be used to attack. These include, but are not limited to, BB guns, pellet guns, air rifles, stun guns, antique guns, handguns, rifles, shotguns and archery equipment.

"Health care staff" means anyone providing qualified medical consultation to your staff or medical care to the children ((and youth)) in your care.

"Hearing" means the administrative review process conducted by an administrative law judge.

"I, " "my, " "you, " and "your" refer((s)) to an applicant for a license issued under this chapter, and to any party holding a license under this chapter.

"Infant" means a child less than ((twelve)) 12 months of age.

"Intellectual and developmental disability" means children with deficits in general mental abilities and impairment in everyday adaptive functioning.

"Intersex" is an umbrella term used to describe a wide range of natural bodily variations when the body is born with a combination of chromosomes, internal organs, or external genitalia that do not develop as expected.

"Lesbian" means females or women who have an emotional or physical attraction for other females or women.

"LGBTQIA+" means lesbian, gay, bisexual, transgender, queer or questioning, intersex, and asexual. The "+" represents identities not specifically named in the LGBTQIA acronym, e.g., pansexual, gender nonbinary, and Two-Spirit.

"License" means a permit issued by us confirming that your agency meets the licensing standards established in this chapter.

"Licensed health care provider" means ((an MD ())) <u>a</u> medical doctor ((), DO ()) (MD), doctor of osteopathy ((), ND ()) (DO), doctor of

naturopathy(( $\frac{1}{1}$ , PA ()) (ND), physician's assistant (PA), or an ((ARNP  $\frac{1}{1}$ )) advanced registered nurse practitioner (ARNP).

"Licensing division (LD)" means the division within DCYF that licenses and monitors foster homes, child placing agencies, and licensed group care facilities.

"Licensing provider portal" means the internet-connected provider application system used by the department and agencies to securely store digital employment and licensing documents and data.

"Licensor" means either:

 $((\frac{1)}{A} \frac{A}{DLR}))$  <u>(a) An LD</u> employee who recommends approvals for, or monitors licenses or certifications for facilities and agencies established under this chapter; or

 $((\frac{(2)}{(2)}))$  An employee of a  $(\frac{(child\ placing\ agency}))$  CPA who certifies or monitors foster homes supervised by the  $(\frac{(child\ placing\ agency}))$  CPA.

"Maternity service" as defined in RCW 74.15.020. These are also

referred to as pregnant and parenting youth programs.

"Medically fragile" means the condition of a child who requires the availability of ((twenty-four-hour)) 24-hour skilled care from a health care professional or specially trained family or foster family member. These conditions may be present all the time or frequently occurring. If the technology, support, and services being received by the medically fragile children are interrupted or denied, the child may, without immediate health care intervention, experience death.

"Missing child" means any child less than ((eighteen))  $\underline{18}$  years of age in licensed care or under the care, custody, and authority of ((CA))  $\underline{DCYF}$  and the child's whereabouts are unknown ((and/or)) or the child has left care without the permission of the child's caregiver or ((CA))  $\underline{DCYF}$ . This does not include children in dependency guardianship.

"Nonambulatory" means not able to walk or exit to safety without the physical assistance of another individual.

"Nonbinary" is a term of self-identification for individuals who do not identify within the limited and binary terms that have described gender identity, e.g., female and male. Nonbinary is also an umbrella term for many identities such as gender expansive, gender fluid, and genderqueer.

"Out-of-home placement" means a child's placement in a home or facility other than the child's parent, guardian, or legal custodian.

"Parent" has the same meaning in this chapter as defined in RCW 26.26A.010(15).

"Probationary license" means a license issued as part of a corrective action to an individual or agency that has previously been issued a full license but is out of compliance with minimum licensing requirements and has entered into an agreement aimed at correcting deficiencies.

"Property or premises" means a facility's buildings and adjoining grounds that are managed by a person or agency in charge.

"Queer" is a term used to express LGBTQIA+ identities and orientations. The term is sometimes used as an umbrella term for all LGBTQIA+ individuals.

"Questioning" means individuals who are exploring their sexual orientation, gender identity, or gender expression at any age.

"Relative" means a person who is related to a child as defined in RCW 74.15.020.

"Respite" means brief, temporary relief care provided by an inhome or out-of-home provider paid by the department. The respite provider fulfills some or all of the care provider responsibilities for a short time.

"Sexual orientation" means an individual's emotional or physical attraction to other individuals.

"SOGIE" is an acronym for sexual orientation, gender identity, and expression which are distinct identifiers everyone has. LGBTQIA+ is a subdistinction within SOGIE self-identifiers. SOGIE includes LGBTQIA+ as well as heterosexual, cisgender, and nonquestioning individuals.

"Transgender" is an umbrella term for individuals whose gender identity or expression is different from cultural expectations based on the sex they were assigned at birth. Gender-affirming medical care is not a prerequisite to identify as transgender. Being transgender does not imply any specific sexual orientation.

"Treatment plan" means individual plans that identify the service needs of the child, including the child's parent or guardian, and identifies the treatment goals and strategies for achieving those goals.

"Two-Spirit" means a modern, pan-indigenous, umbrella term used by some indigenous North Americans to describe Native people in their communities who fulfill a traditional third-gender or other gender-variant, ceremonial, and social role in their cultures. Being Two-Spirit does not imply any specific sexual orientation.

"Volunteer" means a person who provides services without compensation, for your agency.

"Washington state patrol fire protection bureau((" or ")) (WSP/FPB)" means the state fire marshal.

"We, "\_\_"our, "\_ and "us" refer((s)) to ((the department of social and health services)) DCYF, including ((DLR)) LD and ((DCFS)) child welfare staff.

"Young child" refers to a child age ((twelve)) 12 months through eight years old.

- WAC 110-147-1315 When will the department grant me a license? (1) We issue you a ((child placing agency)) CPA license when you, your staff and volunteers, property and premises meet the regulations contained in this chapter, and all required documents are in the department's licensing file. Documents required under this section must be submitted to the department through the licensing provider portal.
- (2) If you are providing adoption services, you must meet the additional requirements in WAC (( $\frac{388-147-1660}{110-147-1730}$ ))  $\frac{110-147-1660}{110-147-1730}$ .
- (3) If your licensed program is providing specialized services for medically fragile children, day treatment services, or maternity services for pregnant and parenting youth, you must meet additional requirements in chapter ((388-145)) 110-145 WAC.

- WAC 110-147-1325 What is required to apply for a ((child placing agency)) CPA license? (1) You must submit ((a completed)) an application ((which is available from the division of licensed resources)) using the department's licensing provider portal; and
- (2) You, your executive director, agency staff, consultants, interns, volunteers, and anyone who may have unsupervised access to children per chapter ((388-06A)) 110-04 WAC are required to:
  - (a) Submit a completed background authorization form;
- (b) Complete an FBI fingerprint check if the individual over ((eighteen)) 18 years of age has lived out-of-state during any portion of the previous three years; and
- (c) Ensure that no employee, volunteer, or subcontractor has unsupervised access to children until a full and satisfactory background check is completed and documentation qualifying the individual for unsupervised access, has been returned to you. Your employees are allowed to work while awaiting fingerprint results, under the provisions of ((WAC 388-06-0500 through 388-06-0540)) chapter 110-05 WAC.

- WAC 110-147-1330 How does the department determine my suitability to become a licensed provider? (1) The department determines your suitability as a licensed provider after receiving:
  - (a) Your application  $((\tau))$  through the licensing provider portal;
- (b) Background ((authorization(s))) authorizations for ((those)) persons listed in WAC (( $\frac{388-147-1325(2)}{7}$ ))  $\frac{110-147-1325(2)}{7}$ ; and
- $\underline{\text{(c)}}$  All ((required)) documentation ((outlined in)) required under this chapter.
- (2) You, your employees, interns, and volunteers must not have had a license or contract denied or revoked from an agency that regulates the care of children or vulnerable adults, unless the department determines that you do not pose a risk to a child's safety, well-being, and long-term stability.
- (3) You, your employees, interns, and volunteers must not have been found to have committed abuse or neglect of a child or vulnerable adult, unless the department determines that you do not pose a risk to a child's safety, well-being, and long-term stability.
- (4) You must demonstrate that you, your employees, interns, and volunteers have:
- (a) The understanding, ability, physical health, emotional stability, and personality suited to meet the physical, mental, emotional, cultural, and social needs of the children under your care; and
- (b) The ability to furnish children with a nurturing, respectful, and supportive environment.
- (5) At any time, we may require you  $((er))_{,}$  your employees, interns, and volunteers to give additional information. We may also require an evaluation of your facility or property, or of a staff  $(erac{per}{son})$ ) working for your agency, by an evaluator recommended by us. Any evaluation requested by the department will be at your expense. You

must give the evaluator written permission to share information with us prior to and throughout the evaluation process.

- (6) Any employee, intern, or volunteer who is found to have misrepresented or provided fraudulent information may be disqualified.
  - (7) Before granting or renewing a license, your licensor will:
- (a) Assess your ability to provide a safe environment for children and to provide the quality of care needed by children placed in your care((. Your licensor will also)); and
- (b) Determine that you, your employees, interns, and volunteers meet training requirements.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1335 What additional steps must I complete prior to (1) You must submit ((to your licensor)) through the lilicensing? censing provider portal a detailed written program description for ((DLR)) <u>LD</u> approval. ((In the)) <u>This</u> description ((you)) must outline:

- (a) Your mission and goals;
- (b) A description of the services you will provide to children and their families;
- (c) Your written policies covering qualifications, duties, and on-going training for developing and upgrading staff skills; and
  - (d) A description of your agency's policies and procedures.
- (2) You must have a site inspection by your ((DLR)) LD licensor or someone designated by ((DLR)) LD who can verify that your Washington state premises have:
  - (a) Adequate storage for staff and client files;
  - (b) A working telephone;
- (c) Adequate space for privacy when interviewing parents or quardians and children;
  - (d) Room or area used for administrative purposes;
- (e) Adequate space for visitation, if needed; and (f) Your license <u>must be</u> clearly posted, ((+)) if <u>the</u> inspection is for a renewal license ((+)).
- (3) You and your staff are required to submit through the licensing provider portal a negative tuberculosis (TB) test or an X-ray, unless you have had a negative TB test in the previous ((twelve)) 12 months. If there is a positive TB test, then the individual must submit a physician's statement identifying that there is no active TB or risk of contagion to children in care.
- (a) We may grant an exception to the TB test, in consultation with a licensed health care provider.
- (b) This exception would require a statement from a licensed health care provider (MD, DO, ND, PA or ARNP) indicating that a valid medical reason exists for not having a TB test.

- WAC 110-147-1340 How long do I have to complete the licensing application process? (1) You must submit a complete ((your)) licensing application and ((submit all DLR required documents within ninety days of submitting the application and)) background authorization forms ((to the department)) for your CPA license, and for licensed foster families certified by your CPA, to LD through the licensing provider portal.
  - (2) For your CPA license:
- (a) Once you receive background clearance notifications for the staff identified on your application, you must submit all required documents within 90 days.
- (b) If you do not meet ((this ninety-day)) the 90-day deadline, your licensor may withdraw your application.
- $((\frac{3}{1}))$  <u>(c)</u> As a courtesy, a renewal notification and renewal materials will be sent ((<del>one hundred and twenty</del>)) <u>120</u> days prior to your license expiration date. If you do not receive this renewal notice it is your responsibility to contact your licensor.
- ((4) You must send the renewal application and all required background authorization forms to your licensor at least ninety days prior to the expiration of your current license.))
  - (3) For licensed foster families certified by your CPA:
- (a) Once you receive background clearance notifications for all identified household members, you must submit all LD required documents within 90 days.
- (b) If you do not meet this 90-day deadline, you may withdraw your application rather than be denied a license.
- (c) As a courtesy, a renewal notification will be sent 90 days prior to the foster home license expiration date.
- (d) You must send the foster home license renewal application and all required background authorization forms to your licensor 90 days prior to the expiration of the current license; you must send the foster home license renewal application and all required background authorization forms to your licensor by the expiration of the current license.

- WAC 110-147-1345 What are the roles of the department and the CPA? (1) We license CPAs, including tribal CPAs, to supervise foster homes. You are authorized to certify to the department that a foster home meets the licensing regulations contained in chapter ((388-148)) 110-148 WAC.
- (2) You have the discretion to certify or not to certify a foster home.
- (3) You may, at your discretion, have additional regulations for a foster home to become and remain a licensed foster home under your supervision.
- (4) The department has the final approval for licensing a foster home that you have certified.

- WAC 110-147-1350 How must I certify a foster home for licensing by the department? (1) You must use applications, home study forms, and procedures that are approved by the department.
- (2) A foster home must be certified by your (( $\frac{\text{child placing agen-cy}}{\text{cy}}$ )) CPA as meeting the licensing requirements in chapter (( $\frac{388-148}{110-148}$ )) 110-148 WAC in order to be licensed by the department.
- (3) A <u>CPA</u> social service staff person must review and sign approval for the foster home licensing application packet before the application is submitted to ((DLR)) <u>LD</u>.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

- WAC 110-147-1375 May an agency be issued more than one type of license? (1) An agency may not be licensed by ((DLR)) LD for more than one type of license in the same building (a group care facility and a CPA for example), unless the department determines that care of one type of client does not interfere with the care of another type of client, and you have approval from the ((DLR)) LD administrator. We may require separation of client populations between the programs. You must meet the requirements for both licenses.
- (2) If you have multiple licenses issued by different ((<del>DSHS</del>)) <u>DCYF</u> licensing agencies in the same location, you must obtain approval from ((<del>DLR</del>)) LD prior to providing services and accepting placements.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

- WAC 110-147-1420 Can employees, volunteers, and subcontractors be disqualified from having access to the children in my agency? (1) The department must disqualify employees, volunteers, or subcontractors if they do not meet the regulations of chapter (( $\frac{388-147}{10-147}$ )) 110-147 WAC or cannot have unsupervised access to children because of their background check as outlined in chapter (( $\frac{388-06A}{10-04}$ )) 110-04 WAC.
- (2) We will notify you if a person in your agency is disqualified from having unsupervised access to children. This could also lead to denial, suspension, or revocation of your license.

 $\underline{\text{AMENDATORY SECTION}}$  (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1430 How do I appeal the decision of the office of administrative hearings' administrative law judge? (1) The decision of the administrative law judge is the final decision of the depart-

- ment unless you or the department files a petition for review with the  $((\frac{DSHS}{}))$  <u>DCYF</u> board of appeals within  $((\frac{twenty-one}{}))$  <u>21</u> calendar days after the administrative law judge's decision is mailed to the parties.
- (2) The procedure for requesting or responding to a petition for review with the board of appeals is described in ((WAC 388-02-0560 through WAC 388-02-0635)) chapter 110-03 WAC.
  - (3) We will not appeal decisions made by the board of appeals.
- (4) If you disagree with the board of appeals, you may file a petition in superior court and ask for further review ((+)) as described in RCW 34.05.510 to 34.05.598((+)).

- WAC 110-147-1440 Who must I employ at my agency? (1) You must employ sufficient numbers of qualified staff to meet the physical, safety, health, and emotional needs of the children placed in your care, appropriate for their age and developmental level. Requirements for specific staff are detailed below.
  - (2) Employees and caregivers must:
- (a) Demonstrate competency, good judgment, and self-control in the presence of children and when performing duties;
- (b) Report suspected abuse, neglect, and exploitation to ((child-ren's administration)) <u>DCYF</u> intake and to the designated administrator or supervisor;
- (c) Know and comply with rules established in this chapter, as well as all other applicable laws; and
- (d) Comply with federal and state antidiscrimination laws related to personnel policies and procedures.

## NEW SECTION

WAC 110-147-1443 Am I required to follow each child's case plan? You and all employees, staff members, and volunteers must adhere to, follow, and comply with the case plan for each of the children in your care.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1490 What are the requirements for volunteers working directly with ((children/youth)) children? (( $\frac{1}{1}$ )) These volunteers must meet the licensing requirements listed in this chapter, including meeting the qualifications for case aide staff, and must:

 $((\frac{1}{a}))$  Be at least  $((\frac{1}{a}))$  21 years of age, unless they are between  $((\frac{1}{a}))$  18 and  $((\frac{1}{a}))$  21 years of age

with an internship or practicum program as per WAC ((388-147-1460(2))) 110-147-1460(2);

- $((\frac{b}{b}))$  (2) Be supervised at all times by at least one paid staff member or a designated volunteer meeting the qualifications of a program manager, working on-site.  $((\frac{b}{b}))$  Volunteers meeting program manager qualifications may provide direct care unsupervised  $((\frac{b}{b}))$ ; and
- $((\frac{c}{c}))$  Receive preservice training that addresses the needs of the population of children in care.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1500 What ((is)) are the preservice training requirements for staff, interns, and volunteers ((having direct care responsibility to children/youth)) who directly care for children? (1) Prior to having responsibility for direct care, staff, interns, and volunteers must have a minimum of ((sixteen)) 16 hours of the following preservice training, including policies and procedures, job responsibilities and facility administration. This is in addition to the first aid and cardiopulmonary resuscitation training (CPR) in WAC ((388-147-1510)) 110-147-1510 and the ((HIV/AIDS/bloodborne)) bloodborne pathogen requirements in WAC ((388-147-1515)) 110-147-1515. Preservice training must be relevant to the type of children and families and the program services you provide. Preservice training ((will usually)) may include ((the following)), but is not limited to:

- (a) Child abuse and neglect identification and reporting requirements;
  - (b) Incident reporting;
    - (c) Accessing community resources;
    - (d) Client confidentiality;
    - (e) Family dynamics and family intervention techniques;
    - (f) Child development;
    - (q) Grief and loss;
    - (h) Cultural needs of children in care;
    - (i) Sexually exploited youth;
    - (j) Behavior management and crisis intervention techniques;
    - (k) Conflict resolution or problem\_solving skills;
    - (1) Substance abuse;
    - (m) Sexually aggressive and physically assaultive training;
    - (n) Effects of trauma on children; ((and))
    - (o) Youth supervision requirements; and
    - (p) Foundational LGBTQIA+ culture.
- (2) If your agency is providing international adoption services, you must also provide training that covers the Hague Convention Articles and the Hague Council on Accreditation (COA) requirements.
- (3) New staff, interns, and volunteers must work shifts with fully trained staff until ((the new staff has)) they have completed all required training.

- WAC 110-147-1505 What is the requirement for staff in-service training? (1) If you have employees in your agency, you must offer in-service training programs for developing and upgrading staff skills. Your training plan must be in writing.
- (2) You must submit an in-service training plan for staff for approval by the department, with a minimum of ((twelve)) 12 hours of annual training for applicable case management, case aide and foster home licensing staff. This training plan must be relevant to the type of children and families you serve, and the program services you provide. You must provide information relevant to the problems experienced by the children you serve, which may include suicide prevention, substance abuse, child abuse and neglect, mental health issues, cultural sensitivity, foundational LGBTQIA+ culture, and predatory behavior.
- (3) You must discuss with your staff updated policies and procedures, as well as the rules contained in this chapter, including the Hague Council on Accreditation if you are providing international adoption services.
- (4) Your training on behavioral management must be approved by ((DLR)) <u>LD</u> and must include nonphysical age-appropriate methods of redirecting and controlling behavior, as described in the ((children's administration)) department's behavior management guide.
- (5) You must document all training including a description of the training provided and the date of the training. This information must be kept in each employee's file or in a separate training file.

<u>AMENDATORY SECTION</u> (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

- WAC 110-147-1515 What ((HIV/AIDS/bloodborne)) bloodborne pathogens training is required? (1) If you or any of your staff provide supervision or direct care to children, ((HIV/AIDS/bloodborne)) bloodborne pathogens training is required. This training should include infection control standards.
- (2) You must use infection control requirements and educational material consistent with the current approved curriculum published by the department of health(( $\frac{1}{1000}$ , office on HIV/AIDS)).
- (3) Staff providing direct care to children must use universal precautions when coming in contact with the bodily fluids of a child.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

wac 110-147-1520 What personnel records must I keep at my agency? (1) You must both submit to the department through the licensing provider portal and keep on file personnel records ((on file)) for each ((staff)) person who is employed or volunteers at your agency.

- (2) For staff who will not have unsupervised access to children you must keep the following:
- (a) An employment application, including work and education history;
  - (b) Education documentation;
  - (c) Job description of the position at your agency;
  - (d) Signed mandated reporter statement;
  - (e) A record of participation in the program's orientation; and
- (f) A record of participation in ongoing staff development training.
- (3) In addition, you must keep the following for staff who have unsupervised access to children:
- (a) A log with background check information, containing dates of request and completion of the checks on all staff, interns, volunteers, and service contractors;
- (b) A record of a negative Mantoux, tuberculin skin tests results, X-ray, or a medical exemption to the skin test or X-ray per WAC ((388-147-1335(3))) 110-147-1335(3);
- (c) ((First Aid/CPR/HIV/AIDS/bloodborne)) First aid, CPR, and bloodborne pathogens training documentation;
  - (d) A copy of government-issued photo ID;
- (e) A copy of a valid driver's license for staff transporting clients or employees; and
- (f) A copy of current auto insurance, ((+)) if using private vehicle to transport ((+)).
- (4) You must maintain a written record of case consultation by a master's level consultant as defined in WAC ((388-145-1470)) 110-145-1470 for case managers with a bachelor's degree.

- WAC 110-147-1525 What are the requirements for children's records? (1) You must retain a record of each child placed by your agency. This record must contain all identifying legal, medical, and social information.
- (2) Any identifying and personal information about a child and the child's family must be kept confidential as required by chapter 26.33 RCW. These records must be kept in a secure place inaccessible to clients, unauthorized staff, and the public. Children's records must never be submitted to the department through the licensing provider portal.
- (3) During a child's placement, the child's record must be maintained and you must attempt to obtain the following information for the child's record, as appropriate to your program:
  - (a) The child's name, birth date, and legal status;
- (b) Name and telephone number of the child's ((DSHS worker)) DCYF caseworker for each child in care;
- (c) Written consent, if any, for providing medical care and emergency surgery ((+)) unless that care is authorized by a court order ((+));
  - (d) A copy of the current legal authority to place;
  - (e) Current case plans;
  - (f) Social summary;

- (g) Documentation of a child's therapy treatment provided by your staff with the signature of the person making the entry to the therapy or progress notes;
  - (h) Log of the child's placement history with your agency; and
- (i) Information related to suspected child abuse and/or neglect referrals made to children's administration, including the concern, date and person taking the report.
- (4) In addition, your records must contain the following information if available:
- (a) Names, ((address)) addresses, and telephone numbers of parents or persons to be contacted in case of emergency;
  - (b) Information on specific cultural needs of the child;
- (c) Medical history including any medical problems, name of doctor, type of medical coverage and provider, date of any illnesses or accidents while placed in your agency's care;
- (d) Mental health history and any current mental health, chemical dependency, and behavioral issues, including medical and psychological reports when available;
- (e) Other pertinent information related to the child's health, including basic medical information, such as current prescription medications, immunizations, allergies, dental records ((and/or)), or eye exams;
- (f) Immunization records, ((+)) if a child's placement extends beyond ((+)) 30 days((+)). If the child is not current with immunization, they must be updated as soon as medically possible. Immunization records are not required to be current for children placed in a foster home licensed by a ((+) a child placing agency)) CPA to provide emergency respite services on a voluntary placement agreement;
- (g) Child's school records, report cards, school pictures, and individual education plans (IEP);
- (h) Special instructions including supervision requirements and suggestions for managing problem behavior;
- (i) Inventory of the child's personal belongings at the time of placement;
- (j) Approved list of individuals with whom the child may have contact;
  - (k) The child's visitation plan; and
- (1) For pregnant and parenting youth, information on the ((mother/father)) other parent of the youth's child, if available.
- (5) If you are unable to obtain this information from the department, you must document your attempt to obtain the requested information in the child's file.

- WAC 110-147-1530 How long should my agency keep the child records? (1) If you have child files with information not returned to the department, you must keep them for six years following the termination or expiration of any license or contract you have with the department. Children's records must never be submitted to the department through the licensing provider portal.
- (2) If your agency closes, you must return all child file information to the department for any child who is or was in the custody of

the department and whose records were not previously destroyed according to ((WAC 388-147-1530(1))) subsection (1) of this section.

- (3) Adoption records should be maintained according to ((388-147-1720(2))) 110-147-1720(2).
- (4) You must inform your  $((\frac{DLR}{}))$  LD regional licensor about the closure of your agency and where the child files will be kept.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

- WAC 110-147-1535 What information can be shared about a child or a child's family? (1) Information about a child or the child's family is confidential and must only be shared with people directly involved in the case plan for a child.
- (2) You may discuss information about the child, the child's family\_ and the case plan only with:
- (a) A representative of the department, including staff from
- ((DCFS)) child welfare, ((DLR)) LD, and DDA;
  (b) A representative of the department of health, the office of the state fire marshal, and the office of the family and children's ombuds;
  - (c) An agency program staff;(d) The child's attorney;
- (e) The child's assigned quardian ad litem or court-appointed special advocate; or
- (f) Others designated by the child's ((DSHS worker)) DCYF caseworker.
- (3) You may check with your child's ((DSHS worker)) DCYF caseworker for quidance about sharing information with the child's teacher, counselor, doctor, respite care provider, any other professional, or others involved in the case plan.

- WAC 110-147-1540 What incidents involving children must I report? (1) You must report the following incidents immediately and in no instance later than ((forty-eight)) 48 hours after the incident to your local ((children's administration)) DCYF intake staff and the child's ((DSHS worker)) DCYF caseworker and tribal Indian child welfare (ICW) case manager as applicable:
- (a) Death, serious illness or injury, or psychiatric care that requires medical treatment or hospitalization of a child in care;
- (b) Any time you suspect physical or sexual abuse, neglect, or exploitation of a child as required under chapter 26.44 RCW;
- (c) Sexual contact between two or more children that is not considered typical play between preschool children;
- (d) Any disclosure by a child in care of sexual or physical
- (e) Any child's suicide attempt that results in injury requiring medical treatment or hospitalization;

- (f) Any use of physical restraint alleged to have been improperly applied or excessive;
- (g) Physical assault between two or more children that results in injury requiring off-site medical attention or hospitalization;
- (h) Physical assault of a foster parent, employee, volunteer, or others by a child in care that results in injury requiring off-site medical attention or hospitalization;
- (i) Any medication given or consumed incorrectly that requires off-site medical attention; or
- (j) Property damage that is a safety hazard and not immediately corrected or may affect the children's health and safety.
- (2) You must report the following incidents related to a child in care as soon as possible or in no instance later than ((forty-eight)) 48 hours after the incident, to the child's ((DSHS worker)) DCYF caseworker and tribal ICW case manager as applicable:
- (a) Suicidal or homicidal thoughts, gestures, or attempts that do not require professional medical treatment;
- (b) Unexpected health problems outside the usual range of reactions caused by medications that do not require professional medical attention;
- (c) Any incident of medication incorrectly administered or consumed;
- (d) Any professional treatment for emergency medical or emergency psychiatric care;
- (e) Physical assault between two or more children that results in injury but does not require professional medical treatment;
- (f) Physical assault of a foster parent, employee, volunteer, or others by a child that results in injury but does not require professional medical treatment;
  - (g) Drug or alcohol use by a child in your care;
- (h) Any inappropriate sexual behavior by or toward a foster child; or
- (i) Use of prohibited physical restraints for behavior management.
- (3) Programs that provide care to medically fragile children who have nursing care staff on duty may document the incidents described in (( $\frac{WAC}{388-147-1540}$ )) subsection (2)(b) and (c) of this section in the facility daily logs, rather than contacting the child's (( $\frac{DSHS}{Worker}$ )) DCYF caseworker or case manager, if agreed to in the child's case plan.

- WAC 110-147-1545 What are my reporting responsibilities when a child is missing from care? (1) As soon as you or your staff have reason to believe a child in your care is missing as defined in WAC ((388-147-1305)) 110-147-1305 or has refused to return to or remain in your care, or whose whereabouts are otherwise unknown, you are required to notify the following:
- (a) The child's assigned (( $\frac{DSHS\ worker}$ ))  $\frac{DCYF\ caseworker}{}$ , as appropriate;

- (b) (( $\frac{\text{Children's administration}}{\text{worker}}$ ))  $\frac{\text{DCYF}}{\text{DCYF caseworker}}$  is not available or it is after normal business hours.
- (2) You are required to contact local law enforcement within six hours if the child is missing. However, if one or more of the following factors are present, you must contact law enforcement immediately:
- ing factors are present, you must contact law enforcement immediately:

  (a) The child is believed to have been taken from placement. This means the child's whereabouts are unknown, and it is believed that the child has been concealed, detained or removed by another person;
- (b) The child is believed to have been lured from placement or has left placement under circumstances that indicate the child may be at risk of physical or sexual assault or exploitation;
  - (c) The child is age ((thirteen)) 13 or younger;
- (d) The child has one or more physical or mental health conditions that if not treated daily, will place the child at severe risk;
- (e) The child is pregnant or parenting and the ((infant/child)) infant or child is believed to be with ((him or her)) them;
- (f) The child has severe emotional problems, ((+))e.g., suicidal thoughts ((+)), that if not treated, will place the child at severe risk:
- (g) The child has an intellectual and developmental disability that impairs the child's ability to care for ((him/herself)) themself;
- (h) The child has a serious alcohol  $((\frac{and}{or}))$  or substance abuse problem; or
- (i) The child is at risk due to circumstances unique to that child.
- (3) After contacting local law enforcement, you must also contact the national center for missing and exploited children at ( $(\frac{1}{800})$ )  $\frac{1-800-843-5678}{843-5678}$ ) and report the child missing from care.
- (4) If the child leaves school or has an unauthorized absence from school, you should consult with the child's (( $\frac{DSHS-worker}{DCYF}$ )  $\frac{DCYF}{Caseworker}$  to assess the situation and determine when you should call law enforcement. If any of the factors listed in subsection(( $\frac{1}{2}$ )) (2) (a) through (i) of this section are present, you and the child's (( $\frac{DSHS-worker}{DCYF}$ )  $\frac{DCYF}{Caseworker}$  may decide it is appropriate to delay notification to law enforcement for up to four hours after the end of the school day to give the child the opportunity to return on their own.
- (5) You must provide the following information to law enforcement and to the child's ((<del>DSHS worker</del>)) <u>DCYF caseworker</u> when making a missing child report, if available:
  - (a) When the child left;
  - (b) The last known location of the child;
  - (c) What the child was wearing;
- (d) Any known behaviors or interactions that may have caused the child's departure;
  - (e) Possible places where the child may go;
- (f) Special physical or mental health conditions or medications that affect the child's safety;
- (g) Known companions who may be aware or involved in the child's absence;
- (h) Other professionals, relatives, significant adults or peers who may know where the child would go; and
  - (i) Recent photo of the child.
- (6) You must ask law enforcement for the missing person report number and provide it to the child's ((DSHS worker)) DCYF caseworker or staff.

- (7) At any time after making an initial report you learn of a missing child's whereabouts, you must report that information to the child's ((DSHS worker)) DCYF caseworker.
- (8) If a child is returned to your care, it is your responsibility to cancel the run report and notify all persons you have informed of the child's run.
- (9) Youth participating in the extended foster care (EFC) program are exempt from these requirements. You must follow all other reporting requirements as defined in WAC  $((\frac{388-147-1540}{1540}))$  110-147-1540.

- WAC 110-147-1550 What changes must I report to my licensor? (1) You must immediately report ((to your licensor)) through the licensing provider portal changes in the original licensing application. You must report changes in:
  - (a) Your location or designated space, including address;
  - (b) Your phone number;
  - (c) Your program description ((and/or)) or population served;
- (d) Structure of your facility or premises from events causing damage, such as a fire, or from remodeling;
- (e) Addition of any new staff person, employee, intern, contractor, or volunteer, who might have unsupervised contact with the children in care;
- (f) Medical illness or incapacity that may affect the ability of any of your program staff to complete their duties;
- (g) Staff arrests or convictions of which you are aware, that occur between the date of your license and the expiration date of your license;
- (h) Any staff changes including the executive director, program ((manager/supervisor)) manager or supervisor, or master's level consultants;
- (i) Death, retirement, or incapacity of the person who holds the license;
- (j) Name of licensed corporation, or the name by which your facility is commonly known; and
  - (k) Your articles of incorporation and bylaws.

- WAC 110-147-1555 What does the department require for my buildings and property? (1) You must maintain your buildings, premises, and equipment in a clean and sanitary condition, free of hazards, and in good repair. You must have a working telephone at your agency at all times.
- (2) All homes certified by your agency must meet the health and safety requirements outlined in chapter ((388-148)) 110-148 WAC.

- WAC 110-147-1595 What are the requirements about nondiscrimination? (1) You must follow all state and federal laws regarding non-discrimination while providing services to children in your care.
- (2) You must ((treat)) support and engage foster children in your care with dignity and respect regardless of actual or perceived race, ethnicity, religion, culture, ((sexual orientation and gender identity)) or SOGIE. You must connect a child with resources that ((meets a child's)) supports and affirms their needs regarding race, ethnicity, religion, culture, ((sexual orientation and gender identity)) and SOGIE.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1610 How often should the case manager contact the foster child and family? The case manager must contact a foster child and the foster child's foster family( $(\tau)$ ) according to a case plan that reflects the child's needs. Case managers must make in home health and safety visits as required by ((children's administration)) the department's policy. Each foster child and one or both foster parents must be seen at each visit.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1615 Can children in my care receive services through the extended foster care program? Foster parents can serve youth enrolled in the extended foster care program. You must adhere to chapter ((388-25)) 110-50 WAC.

- WAC 110-147-1620 What are the requirements for supervising children? (1) Your agency is responsible to provide adequate supervision at all times. You should arrange and maintain supervision of children during times of crisis when one or more family members or staff members may be unavailable to provide the necessary supervision or coverage for other children in care.
- (2) When special supervision is required and agreed upon between the department and the agency, the agency must ensure the necessary supervision is being provided. This supervision may require auditory or visual supervision at all times.

- (3) Prior to placement, you must inquire if a child poses a risk to the other children or has special supervision needs by obtaining information from the parent, ((<del>legal</del>)) guardian, the child's ((<del>DSHS worker</del>)) <u>DCYF caseworker</u>, therapist, or previous placements. You must:
  - (a) Develop a plan to address those needs;
- (b) Obtain approval from the child's ((<del>DSHS worker</del>)) <u>DCYF caseworker</u> if the child is under the care and authority of the department; and
  - (c) Inform the foster parent who will be caring for the child.
- (4) All high\_risk activities, including the use of power driven machines or other hazardous equipment, must be properly supervised by an adult. When participating in high\_risk activities, children must:
- (a) Be instructed how to use and required to use appropriate safety equipment, such as helmets and life vests; and
- (b) Be in continuous visual or auditory range at all times, unless approved by the child's ((DSHS worker)) DCYF caseworker.

WAC 110-147-1630 Where may I obtain a child's health history? You may obtain the health history from the child's (( $\frac{DSHS}{DCYF}$  worker or))  $\frac{DCYF}{DCYF}$  caseworker, parent, or guardian making the placement for all children placed in your facility.

- WAC 110-147-1635 Am I required to assess a child's need for immediate medical attention? (1) When a child first enters out-of-home care, an initial health screen is required as soon as possible, but no later than five days after entering your program.
- (2) You must also make reasonable attempts to obtain the following health history:
  - (a) Allergies;
  - (b) All currently prescribed medications; and
  - (c) Any special physical or mental health issues.
- $((\frac{(2)}{(2)}))$   $\underline{(3)}$  If the child remains in placement beyond  $((\frac{\text{seventy-two}}{\text{two}}))$   $\underline{72}$  hours, you must contact the child's  $((\frac{\text{DSHS worker}}{\text{caseworker}}))$   $\underline{\text{DCYF}}$   $\underline{\text{caseworker}}$ , parent, or  $((\frac{\text{legal}}{\text{legal}}))$  guardian to obtain the following information:
- (a) The date of the child's last ((physical/dental)) physical and dental exams;
  - (b) ((A)) Their history of immunizations; and
  - (c) Clinical and medical diagnoses and treatment plans.
- $((\frac{3}{3}))$  When a child leaves your care, the health history of the child must be retained by your agency or returned to the department.
- (5) You should refer to the department of health's dental care brochure, Publication Nos. 920-923 through 920-928, as guides for maintaining proper dental care for children.

- WAC 110-147-1640 When must I get an early and periodic screening, diagnosis, and treatment (EPSDT) exam for a child? (1) Children who enter out-of-home care, except for children placed by DDA through a voluntary placement agreement, must receive an ((early and periodic screening, diagnosis and treatment ())EPSDT((+)) exam within ((thirty)) 30 days, unless they have had an EPSDT exam in the previous ((thirty)) 30 days. ((Exception:)) DCYF caseworkers will notify you when subsequent EPSDT exams are required.
- (2) For children placed by DDA through a voluntary placement agreement ((for children placed by DDA)), follow the direction of DDA regarding the need for an EPSDT exam after placement((+)). ((Children also receive subsequent periodic EPSDT exams; information on these required exams may be obtained from the child's DSHS worker.))

<u>AMENDATORY SECTION</u> (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

- WAC 110-147-1645 What are the requirements for obtaining consent for emergent and routine medical care? (1) The department is the legal custodian for children it places in care. We have the authority to consent to emergent and routine medical services on behalf of a child under the age of ((eighteen)) 18. Youth in care over the age of ((eighteen)) 18 must consent to their own medical care or have an identified person who has been granted the legal authority to consent on their behalf. We delegate some of the authority to providers. You must contact the child's ((DSHS worker or children's administration)) DCYF caseworker or DCYF intake for specific information for each child.
- (2) If you care for children in the custody of another agency, tribal court or other court, you must follow the direction of that agency or court regarding permission to provide consent for medical care.
- (3) In case of medical emergency, contact the child's( $(DSHS\ work-er\ or\ children's\ administration)$ ) <u>DCYF</u> caseworker or <u>DCYF</u> intake as soon as possible.
- (4) It is your responsibility to ensure that a child receives the necessary medical attention if injured or harmed. In the event of a life threatening medical emergency, you must contact 911 prior to transporting the child to a medical facility.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1650 Can I accept medication from a child's parent or guardian? (1) The only medicine you may accept from the child's parent, guardian, or responsible relative is medicine in the original container labeled with:

- (a) The child's first and last name;
- (b) The date the prescription was filled;
- (c) The medication's expiration date; and
- (d) ((Legible instructions for administration ()) Dosage instructions for the medication that are either the manufacturer's instructions or included on the prescription label(() of the medication)).
- (2) You must notify the child's ((DSHS worker)) <u>DCYF caseworker</u> if you have any concerns about medication being provided to you by the child's parent or guardian.

- WAC 110-147-1660 What qualifications must adoption services staff meet? (1) Your agency must have staff serving in the roles of executive director, program manager, and case managers as identified in WAC (( $\frac{388-147-1440}{110-148-1490}$ ))  $\frac{110-147-1440}{110-148-1490}$ .
- (2) Staff may serve in multiple roles, but must meet the qualifications of each program role.
- (3) Agencies providing intercountry adoptions must also have an individual on staff with experience in providing intercountry adoptions.

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

- WAC 110-147-1690 What steps must I take prior to entering into a contract with an adoptive applicant? (1) The applicant(((s))) must submit an application to your agency.
- (2) You must complete an adoption home study as outlined in WAC ((388-147-1695)) 110-147-1695.
- (3) Once you have approved an application, but before you sign a contract for services, you must give the applicants a written statement about:
- (a) The adoption agency's fixed fees and fixed charges to be paid by the applicant per WAC ((388-147-1680)) 110-147-1680;
- (b) An estimate of fixed fees or additional itemized expenses to be paid by applicant; and
- (c) Specific services covered by fees that you offer for child placement or adoption.

 $\underline{\text{AMENDATORY SECTION}}$  (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1720 How do I maintain children's records? (1) Your ((child placing agency)) CPA must retain a record of each child you place in permanent custody. This record must contain all available

identifying legal, medical, and social information and must be kept confidential, as required by chapter 26.33 RCW. Children's records must never be submitted to the department through the licensing provider portal.

(2) If your agency closes, you must make arrangements for a period of ( $(\frac{\text{ninety-nine}}{\text{nine}})$ ) 99 years for the retention of adopted children's records who were not in the custody of the department. You must inform your ( $(\frac{\text{DLR}}{\text{DLR}})$ ) LD regional licensor about the closure of your agency and where these children's records will be kept.